

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. PU4724USW				
Applicant(s): Barrett et al.								
Application No. 10/510,469	Filing Date 10/7/04	Examiner Jason Michael Nolan	Customer No. 23347	Group Art Unit 1626	Confirmation No. 6905			
Invention: DERIVATIVES OF 1-(OXOAMINOACETYL)PENTYL CARBAMATE AS CATHEPSIN K INHIBITORS FOR THE TREATMENT OF BONE LOSS								
<u>COMMISSIONER FOR PATENTS:</u>								
Transmitted herewith is an amendment in the above-identified application.								
The fee has been calculated and is transmitted as shown below.								
CLAIMS AS AMENDED								
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE			
TOTAL CLAIMS	48 -	48 =	0	x \$50.00	\$0.00			
INDEP. CLAIMS	2 -	3 =	0	x \$210.00	\$0.00			
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00			
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00			
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 07-1392 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
<i>Kathryn L. Coulter</i> _____ Signature			Dated: 12/18/2007					
Kathryn L. Coulter, Reg. No. 45,889 Attorney for Applicants GlaxoSmithKline Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-3398 Telephone: (919) 483-1467 Facsimile: (919) 483-7988			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) </td> </tr> <tr> <td style="text-align: center;"> _____ Signature of Person Mailing Correspondence </td> </tr> <tr> <td style="text-align: center;"> _____ Typed or Printed Name of Person Mailing Correspondence </td> </tr> </table>			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date)	_____ Signature of Person Mailing Correspondence	_____ Typed or Printed Name of Person Mailing Correspondence
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CC:								